

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

MetLife Inc. Employees' Political Participation Fund A - Federal Only

ADDRESS (number and street)

1095 Avenue of the Americas

☐(Check if address
is changed)

New York

CITY ▲

NY

STATE ▲

10036

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐(Check if address
is changed)

mgraeff@metlife.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address
is changed)

n/a

2. DATE

03 / 12 / 2014

3. FEC IDENTIFICATION NUMBER ►

C C00493551

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy S Davenport

Signature of Treasurer

Nancy S Davenport

[Electronically Filed]

Date

03 / 18 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)